

REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition. Standards

Standards for Adult Correctional Institutions
Fourth Edition Standards

Standards for Adult Community Residential Services
Fourth Edition. Standards

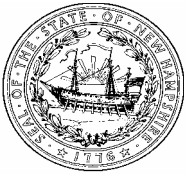
Standards for Adult Probation and Parole Field Services
Third Edition. Standards

Other

4:8 Gifts to the State

MULLEN/pf

Attachment



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF CORRECTIONS**

**William Wrenn,
Commissioner**

**Bob Mullen
Director**

DONATION RECORD

Donor's Name: _____
(If making a donation on behalf of an organization, list organization)

Donor's Address: _____

Donor's Phone Number: _____

Donor's Relationship to DOC:

_____ Volunteer _____ Employee
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_____ Approved Visitor _____ Other: _____

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_____ NHSP/Women _____ HWH (circle one: CHM, NEH, SFHC)
_____ NCF _____ Field Services (list office) _____

<i>Quantity</i>	<i>Description of item</i>	<i>INTENDED USE</i>	<i>estimated value</i>

Delivered by: _____

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DOC contact for information regarding this donation:

Name: _____

Phone: _____